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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Andrew Gant

Serial No.:

10/700,256

Filed:

November 11, 2003

For:

SURGICAL SAW BLADE COUPLER

Examiner:

Unknown

Group Art Unit:

Unknown

Attorney Docket No.:

60,210-190

## **INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §1.97(b) and in compliance with 37 C.F.R. §1.56, Applicants hereby makes of record the items listed on the attached Form PTO/SB/08A.

This Information Disclosure Statement is being submitted prior to the mailing of a first Office Action and, therefore, it is believed that no fee is necessary. However, if any fees are due with this submission, or at anytime during the pendency of this application, the Commissioner is hereby authorized and respectfully requested to charge our Deposit Account 08-2789.

Respectfully submitted,

**HOWARD & HOWARD ATTORNEYS, P.C.** 

January 20, 2004

Date

James R. Yee, Registration No. 34,460

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**CERTIFICATE OF MAILING** 

I hereby certify that this correspondence is being deposited with the United States Postal Service as fist class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date January 20, 2004.

Melissa S. Dadisman

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PTO/SB/08A (08-00)

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Substitute for form 1449A/PTO Complete if Known Application Number 10/700,256 INFORMATION DISCLOSURE 11/3/2003 Filing Date STATEMENT BY APPLICANT First Named Inventor **Andrew Gant** Group Art Unit Unknown (use as many sheets as necessary) **Examiner Name** Unknown 60,210-190 Sheet of Attorney Docket Number

U.S. PATENT DOCUMENTS							
		U.S. Patent Document			Name of Patentee or Applicant	Date of Publication of	Pages, Columns, Lines, Where Releva
Examiner Initials *	Cite No.1	Number	Kind C		of Cited Document	Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevan Passages or Relevant Figures Appear
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FOREIGN PATENT DOCUMENTS								
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		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> ( <i>if known</i> )	or Applicant of Cited Document	Cited Document MM-DD-YYYY		
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